

DRAFT Comprehensive State Plan 2012-2018

Executive Summary

Section 37.2-315 of the *Code of Virginia* requires the Department of Behavioral Health and Developmental Services (Department) to develop and update biennially a six-year Comprehensive State Plan. The plan must identify the services and supports needs of persons with mental health or substance use disorders or intellectual disability across Virginia; define resource requirements for behavioral health and developmental services; and propose strategies to address these needs. This section also requires that the plan be used in the preparation of the Department's biennium budget submission to the Governor.

Services System Overview: Title 37.2 of the *Code of Virginia* establishes the Department as the state authority for the behavioral health and developmental services system. The mission of the Department's central office is to provide leadership and service to improve Virginia's system of quality treatment and prevention services and supports for individuals and their families whose lives are affected by mental health or substance use disorders or intellectual disability.

The Department seeks to promote dignity, choice, recovery, and the highest possible level of participation in work, relationships, and all aspects of community life for these individuals and is committed to implementing the vision "of a consumer-driven system of services and supports that promotes self-determination, empowerment, recovery, resilience, health, and the highest possible level of individual participation in all aspects of community life, including work, school, family and other meaningful relationships" (*State Board Policy 1036 (SYS) 05-3*).

Virginia's public services system includes nine state hospitals, five training centers (one of which provides administration services to a medical center, and a sexually violent predator rehabilitation center that are operated by the Department and 39 community services boards and one behavioral health authority (referred to as CSBs) established by local governments.

- CSBs are responsible for delivering community behavioral health and developmental services, either directly or through contracts with private providers. They are single points of entry into the publicly funded behavioral health and developmental services system, with responsibility and authority for assessing individual needs, providing an array of services and supports, and managing state-controlled funds for community-based services.

In FY 2010, CSBs provided mental health services to 108,158 individuals, developmental services to 19,374 individuals, substance abuse services to 38,661 individuals, and emergency, motivational treatment, consumer-monitoring, and early intervention and assessment and evaluation services and consumer-run programs that are not included above in a specific program area to 85,158 individuals, for an unduplicated total of 194,662 individuals who received some type of behavioral health or developmental service. Although the total number of individuals served by CSBs continues to increase, the CSBs continue to confront waiting lists for services. Between January and April 2011, 14,004 individuals were waiting to receive at least one CSB service.

- State facilities provide highly structured intensive inpatient treatment and habilitation services. Current operating capacities are 1,514 beds in state hospitals, 1,346 beds in training centers, 87 beds at Hiram Davis Medical Center, and 300 beds at the Virginia Center for Behavioral Rehabilitation. In FY 2011, state facilities served 6,338 individuals, a 5.8 percent decrease from FY 2010.

In FY 2010, total behavioral health and developmental services system funding was \$2.2216 billion, of which:

- Community services funding was \$1.628.9 million or 73 percent of total system funding,
- Facility services funding was \$555.9 million or 25 percent of total system funding, and
- Department central office funding was \$36.8 million or 2 percent of total system funding.

Funding for Virginia's public behavioral health and developmental services system comes from a variety of sources, including state general funds, local matching dollars, federal grants, and fees, including Medicaid.

Estimated Prevalence: By applying prevalence rates from national epidemiological studies and the 2006, 2007, and 2008 National Household Surveys on Drug Use and Health to the 2010 U.S. Census counts, the Department estimates that:

- Approximately 316,552 adults in Virginia have had a serious mental illness during the past year.
- Between 84,978 and 103,861 children and adolescents have a serious emotional disturbance, with between 47,210 and 66,094 exhibiting extreme impairment.
- Approximately 144,018 individuals are conservatively estimated to have a developmental disability, of which 73,890 (ages 6 and older) have intellectual disability and 1 in 91 children have an autism spectrum disorder.
- Approximately 18,427 infants, toddlers, and young children (birth through age 5) have developmental delays requiring early intervention services.
- Approximately 187,669 adults and adolescents (ages 12 -18) abuse or are dependent on any illicit drug, with 130,081 meeting the criterion for dependence, and 517,613 adults and adolescents abuse or are dependent on alcohol, with 242,547 meeting the criterion for dependence.

However, only a portion of persons with diagnosable disorders will need services at any given time, and an even smaller portion will require or seek services from the public sector.

CSB Waiting Lists: During the first quarter of calendar year 2011, CSBs completed a point-in-time survey of each person identified by the CSB as being in need of specific services. To be included on the waiting list for CSB services, a person had to have sought the service and been assessed by the CSB as needing that service. CSB staff also reviewed their active cases to identify individuals who were not receiving all of the amounts or types of services that they needed. CSBs identified a total of 14,004 individuals who were waiting for services. Of these:

- 5,716 (4,017 adults and 1,699 children and adolescents) were reported to need mental health services;
- 6,415 (4,040 adults and 2,375 children and adolescents) were reported to need developmental services; and
- 1,873 (1,772 adults and 101 adolescents) were reported to need substance abuse treatment services.

This count includes 108 individuals who were on mental health and substance abuse treatment services waiting lists, 76 individuals who were on mental health and developmental services waiting lists, and one person who was on waiting lists for developmental and substance abuse treatment services.

This point-in-time methodology for documenting unmet service demand is conservative because it does not identify the number of persons who needed services over the course of a year.

Services System Strategic Initiatives: Behavioral health and developmental services system strategic initiatives included in the Comprehensive State Plan 2012-2018 incorporate the following *Creating Opportunities: A Plan for Advancing Community-Focused Services in Virginia* focus areas:

Behavioral Health Services

1. Emergency response system for individuals in crisis;
2. Peer and recovery support services;
3. Substance abuse treatment services;
4. State hospital effectiveness and efficiency; and
5. Child and adolescent behavioral health services.

Developmental Services

1. Community developmental services and supports capacity; and

2. Autism spectrum disorder and developmental disabilities services and supports.

Systemwide Supports and Services

1. Housing;
2. Employment opportunities; and
3. Case management system capability.

Other strategic initiatives included in the Comprehensive State Plan 2012-2018 follow.

1. Services system quality improvement and accountability;
2. State facility electronic health record system and health information exchange;
3. Cultural and linguistic competency;
4. Civil commitment of sexually violent predators; and.
5. State facility capital infrastructure and energy efficiency.

Summary of Resource Requirements: The following capacity development priorities respond to critical issues facing Virginia's behavioral health and developmental services system:

Behavioral Health Services Investment Priorities

- Expand statewide capacity and fill identified gaps in emergency and crisis response services and expand services that prevent or reduce the need for crisis response services. Based on a statewide assessment, these services include local purchase of inpatient psychiatric services, Programs of Assertive Community Treatment (PACT), police reception and drop-off program, emergency critical time intervention services, and Crisis Intervention Teams (CITs).
- Enhance state hospital effectiveness and efficiencies by decreasing forensic pressures on state hospitals with expanded funds for Discharge Assistance Project (DAP) placements, outpatient restoration services, and outpatient forensic evaluations; enhancing Southern Virginia Mental Health Institute forensic capacity; and addressing capacity issues at Northern Virginia Mental Health Institute and Commonwealth Center for Children and Adolescents.
- Expand statewide capacity and fill identified gaps in substance abuse treatment services and implement a substance abuse services workforce development initiative. Based on a statewide assessment, these services include case management, community diversion services for young non-violent offenders, intensive outpatient services, detoxification services, adolescent services, medication assisted treatment, residential services for pregnant women and women with dependent children in Southwest Virginia, intensive coordinated care for pregnant and post-partum women (Project Link), peer support services, employment services, supportive living capability, and uniform screening and assessment for substance use disorders.
- Expand child and adolescent behavioral health services statewide to fill identified gaps in basic services, improve quality management and oversight, and implement a children's behavioral health workforce initiative. Based on a statewide assessment, these base services include regional crisis stabilization units and mobile crisis response teams for children, case management, and psychiatric services.
- Establish an Office of Peer Services and Recovery Supports to facilitate development of peer services and recovery supports and assure that peer support specialists demonstrate that they meet competency requirements through a state certification program.

Developmental Services Investment Priorities

- Collaborate with the Department of Medical Assistance Services (DMAS) to expand waiver capacity, modify existing or create new waivers, and address waiver rate structures.
- Expand developmental services capacity to implement the settlement agreement with the U.S. Department of Justice (DOJ).

- Improve the Department's quality assurance and oversight capacity to identify deficiencies, allow electronic individual-level tracking of incidents and systemic analyses of trends and patterns, and follow-up to assure corrective action plans are implemented.

Systemwide Investment Priorities

- Establish a state certification program with core competency training for case managers to demonstrate that they meet competency and training requirements.
- Implement the clinical treatment/medical records modules of an electronic health record (EHR) at all the state facilities.
- Improve Department quality assurance and improvement processes.

Conclusion: Implementation of the strategic initiatives identified in the *Comprehensive State Plan 2012-2018* will continue Virginia's progress in advancing a community-focused system of recovery-oriented and person-centered services and supports that promote the highest possible level of participation by individuals receiving behavioral health or developmental services in all aspects of community life including work, school, family, and other meaningful relationships.

Successful implementation of the plan's initiatives will support the Governor's expressed intention to achieve a Commonwealth of Opportunity for all Virginians, including individuals receiving behavioral health or developmental services. They also will enhance the ability of the services system to perform its core functions in a manner that is effective, efficient, and responsive to the needs of individuals receiving services and their families.